

1 **Do parents shape their children to like sweet taste?**

2 **Parental influence on preferences for sweetness in pre-schoolers**

3 Authors: Frida Felicia Fry Vennerød^{a, b}*, Valérie Lengard Almli^a, Ingunn Berget^a, and Nanna
4 Lien^b

5 ^a Nofima AS, P.O. Box 210, 1431 Ås, Norway.

6 ^b Department of Nutrition, Institute of Basic Medical Sciences, University of Oslo, PO Box
7 1046, Blindern, 0316 Oslo, Norway:

8 Corresponding author at: Department of Nutrition, University of Oslo. PO Box 1046, Blindern,
9 0316 Oslo, Norway. Tel.: +47 47025550. E-mail address: Frida.vennerod@nofima.no

10 **Abstract**

11 Children generally have a high acceptance for sweetness, but differ in their preferences for the
12 intensity of the taste. This study investigates how food exposure, parental attitudes and behaviors,
13 and children's taste sensitivity are associated with five-year olds' preferences for sweetness.

14 Preference data were collected from 135 children at ages four (Mean age: 46.3 months, SD: 3.4,
15 56% boys) and five years old (Mean age: 57.5 months, SD: 3.3; 58% boys) in a ranking by
16 elimination procedure in the spring of 2015, and 2016. The taste carriers were fruit-flavored
17 beverages and chocolate, both with three levels of sugar content. Quantitative descriptive
18 analysis testified three distinct levels of sweetness in each sample triad. The protocol did not
19 require the child to respond verbally, and included elements of gamification in order to engage
20 the children. In addition, a parental questionnaire enquired about exposure to different foods,
21 parental food attitudes and behaviors as well as socio-demographic characteristics.

22 Path modelling using PLS-SEM indicated that differences in children's preference for sweetness
23 could be explained by differences in exposure to foods, including more frequent exposure to
24 sweet foods and snacks associated with a higher sweet preference. More frequent exposure to
25 fruit and bitter snacks, were associated with a lower sweet preference for the drink and chocolate,
26 respectively. Parental attitudes and behaviors as well as children's sensitivity to sweetness and
27 bitterness were significantly associated with what foods the children were frequently exposed to.

28 **Keywords:** Children; Preference; Sweet; Parental influence; Parental attitude; Sensitivity

29 **1. Introduction**

30 Healthy food habits for children are important both during childhood and in a longitudinal
31 perspective. Food habits are relatively stable throughout the childhood years (De Cosmi,
32 Scaglioni, and Agostoni, 2017; Maier-Nöth, Schaal, Leathwood, and Issanchou, 2016; Mannino,
33 Lee, Mitchell, Smiciklas-Wright, and Birch, 2004; Nicklaus, 2016), and food variety persists
34 from childhood to adolescence and early adulthood (Nicklaus, Boggio, Chabanet, and Issanchou,
35 2004). To establish healthy habits, it is important to understand the factors that influence these
36 habits. Food preferences have been found to be the main predictor of food habits in children
37 (Liem and Mennella, 2002; Cooke, 2007), and the correlation between food preferences and
38 actual consumption of foods are significantly higher for children than adults (Birch, 1979).

39 Highlighting the importance of understanding preferences, preference for sweet taste is related to
40 being overweight in children (Lanfer et al., 2012), and a diet with high levels of sugar is not in
41 line with the recommendations for healthy food habits (Commission of the European
42 Communities, 2007; Helsedirektoratet, 2015, WHO, 2016).

43 **2. Theory**

44 2.1 Development of sweet taste

45 The innate preference for sweet taste is identified and universally accepted (Lawless, 1985;
46 Schwartz, Issanchou, and Nicklaus, 2009), as infants generally prefer sweet taste to no taste
47 (Schwartz et al, 2009, Mennella, Finkbeiner, Lipchock, Hwang, and Reed, 2014). Furthermore,
48 children have a higher preference for sweet taste than adults do (Lawless, 1985; Schwartz et al.,
49 2009). However, there are large differences in preferences for sweetness also among children,

50 and the reasons for these differences are not fully understood. The higher preference for
51 sweetness in children compared to adults might be due to lower sensitivity, in particular for
52 sucrose (de Graaf & Zandstra, 1999). Supporting the link between taste sensitivity and
53 preference, sensitivity for the bitter agent quinine has been found to indicate a preference for
54 higher sucrose intensities (Duffy, Peterson, Dinehart & Bartoshuk, 2003; Hayes & Duffy, 2008).
55 More bitter-sensitive variants of the bitter receptor gene TAS2R38 have also been associated with
56 both higher sugar intake in children (Joseph, 2015) and sweet preference (Mennella, Pepino, and
57 Reed, 2006). Additionally, adult PROP-tasters find vegetables to be both more bitter and less
58 sweet than non-tasters (Dinehart, Hayes, Bartoshuk, Lanier, and Duffy, 2006), highlighting the
59 complex relationship between sweetness and bitterness, but more research is needed to
60 understand this relationship in children.

61 Two other individual factors that could influence sweet preferences are age and gender. A general
62 increase in sweet preference through the preschool years has been found (Cooke and Wardle,
63 2005; Lanfer et al., 2013), but as far as we know, there are no longitudinal studies investigating
64 this with pre-schoolers. Some studies found boys to have a higher liking for sweet items than
65 girls do (Cooke and Wardle, 2005), but regarding preference, other studies did not find a gender
66 effect (Liem, and de Graff, 2004).

67 Parental health attitudes and behaviours are important throughout the preschool years, as the
68 parents usually decide what food is available for their children at home. Mothers generally do not
69 serve their children food they dislike themselves (Skinner et al., 2002), indicating that food
70 preferences can be inherited through shared environmental exposure.

71 Additionally, adults with low health concern tend to prefer sweeter foods (Pohjanheimo and

72 Sandell, 2009), and let their children eat sweets more often (Schneider et al., 2013). This
73 heightened exposure to sweet foods can influence the children in two ways: Firstly, it will
74 familiarize the children to these items, and the children might thus end up preferring higher
75 intensities of sweetness (Liem and Mennella, 2002). Secondly, a high sweet preference might be
76 inherited through modelling, as children learn through observations and modelling from others
77 (Bandura, 1977). Parents are the most important role models for children (Kildegard, 2011), and
78 might thus model their own preferences on to their children through their own dislikes or likes of
79 certain foods. Support for this model is found in studies indicating that the diet of children is
80 directly influenced by their parents' diet (Brown and Ogden, 2004).

81 The parental use of food as a reward for good behaviour has been found to influence children's
82 food preferences, and is commonly used (Casey and Rozin, 1989; Schneider et al., 2013). Using
83 food as a reward reinforces the positive relationship towards the food rewarded (Schneider et al.,
84 2013); but only if it is liked (see Cooke, Chambers, Añez, and Wardle, 2011, for a review). The
85 conditioned response to frequently being given sweet foods as a reward might therefore be a
86 heightened preference for sweet items (Birch and Fisher, 1998; Newman and Taylor, 1992).
87 Additionally, a higher preference for very sweet items might develop even though sweet items
88 are rarely consumed, if the sweet items are given as rewards. Children of parents who use food
89 rewards also consume more sweets (Vereecken, Keukelier, and Maes, 2004).

90 The number of children can also alter the parents' behaviours: Children with older siblings are
91 exposed to more snack foods than children without older siblings (North and Emmet, 2000;
92 Robinson et al., 2007), whereas first-born children are exposed to more fruit and vegetables
93 (Scott, Chih, and Oddy, 2012). North and Emmet (2000) explain this difference as being due to
94 parental time-constraint, increasing the amount of ready-meals and snacks, and decreasing fruits

95 and vegetables, as well as younger children receiving snacks just because their older siblings do.
96 Hence, family size influences parental behaviours, and therefore their children's food exposure.

97

98 2.2 Hypotheses

99 This study investigates how food exposure, parental attitudes and behaviours, and taste
100 sensitivity, as well as gender and age, together and separately, influence preferences for
101 sweetness intensities in beverages and chocolate

102 *H1. Children's diet influences their sweetness preference*

103 More frequent exposure to foods will influence sweetness preference in three different ways:
104 More high-sweet food and snacks to a higher preference for sweetness, more fruit to a lower
105 sweet preference, and more bitter snacks to as lower preference for sweetness in dark chocolate,
106 and thus a higher preference for bitterness.

107 *H2. Parental attitudes and behaviours influence their children's sweet preferences, both directly* 108 *and indirectly through their effect on food exposure*

109 Children of parents who use a higher level of food rewards will have a higher preference for
110 sweetness. Additionally, children of parents with less healthy attitudes will be more frequently
111 exposed to sweet foods, and less to both fruit and bitter snacks. Having older siblings also
112 contributes to a higher exposure to sweet food and snacks, and lower exposure to fruits.

113 *H3. Children's taste sensitivity influence their sweetness preference, both directly and indirectly*

114 Children with a lower sensitivity for sweetness will have a higher preference for sweetness, and
115 will more frequently be exposed to high-sweet food and snacks. We propose that children with a

116 higher sensitivity for bitterness will have a lower preference for sweetness, and be exposed to
117 more bitter snacks, and less high-sweet items.

118

119 **3. Materials and methods**

120 *3.1. General overview*

121 Two types of data has been collected, both from the first and second year of a longitudinal study
122 investigating taste preferences during the preschool-years from age four to age six. Firstly, sweet
123 preferences in chocolate and drink, as well as sensitivity for sweet and bitter, were tested with
124 children in their kindergartens. Secondly, their parents received Web-based questionnaires
125 regarding both the child's food exposure, and parental attitudes and behaviours. The children
126 were recruited from 16 different kindergartens. In total 175 children were invited of which 145
127 got parental consent to participate for at least one year during the data collection, and 135
128 participated during both years. Before each test, the children had to agree verbally to participate.
129 The main characteristics of the participants are given in Table 1.

130

Table 1. *Main characteristics of the participants*

Year	Respondent population (Invited)	Min age - Max age in months	Mean age in months (SD)	Boys
1	140* (170)	39-51	46.3 (3.4)	56%
2	140* (145)	49-61	57.5 (3.3)	58%

131 *One hundred and thirty five children participated in the study in both years. Five children dropped out of the
132 kindergartens in the study after Year 1, whereas five new children started in one of the kindergartens between Year 1
133 and Year 2 in the study.

134

135

136 *3.2. Preference and sensitivity testing*

137 *3.2.1. Samples*

138 The taste carriers were fruit-flavoured beverages with three distinct levels of sweetness, and
139 chocolate with three levels of cocoa, all prepared especially for this study by the Norwegian
140 company Orkla Foods Norge. The samples were chosen as they were child-friendly, easy to
141 manipulate with three distinct levels of basic taste, and could easily be both brought and served at
142 the different kindergartens. The drinks were served at room temperature, with 10 ml per sample,
143 and the chocolates were offered in two small pieces per sample.

144 Quantitative descriptive analysis by a professional sensory panel of nine females was used to
145 optimize the samples. Several beverages were produced and profiled, until three with distinct
146 levels of sweetness were chosen. The panel found five additional attributes with significant
147 differences (Figure 1). The chosen beverages differed in the level of added sugar: 4% (low) vs.
148 12% (medium) vs. 18% (high). For the chocolate samples, the three levels of sweetness were
149 significantly different, and there were also three distinct levels of bitter taste, but there were
150 several other attributes with significant attributes, all displayed in Figure 2 with the spider plot of
151 the chocolate.

152 The study also included drinks with either added bitter or sour taste, but the data from those
153 drinks are not reported here.

154 <Figure 1 here>

155 <Figure 2 here>

156

157 3.2.2. Procedure

158 The experimenters visited each kindergarten four times. One of the visits was to familiarise the
159 children with the experimenters, and the two other sessions were sensitivity testing. The children
160 were twice served four pairs consisting of water samples and diluted taste component, with the
161 four pairs served successively containing either bitter (quinine) or sweet (sucrose) taste. The task

162 was to discriminate consistently between the two samples within the pair. For the complete
163 protocol and set-up of the sensitivity-testing, see Vennerød et al (2017).

164 The preference test was conducted at the fourth session. It was generally well understood, and it
165 took approximately 15 minutes to complete the test, but there were large variations. A total of
166 nine experimenters managed the test sessions, and the same two experimenters tested the children
167 each year.

168 Five children were brought into the room where the testing took place, and the two experimenters
169 introduced the children to a teddy bear with a birthday crown. The children were asked why the
170 teddy bear was wearing a crown, and then if they wanted to sing a birthday song for him. All
171 children participated in the song, and after the song, the experimenters explained that the teddy
172 bear would celebrate his birthday with other bears. The children were invited to help select good
173 drinks and chocolates for his party.

174 Each child was then tested individually. The child was asked to choose one of three cards placed
175 facedown. The colour of the picture card corresponded to the colour of the cups – blue for all
176 bitter drinks, pink for all sour drinks, and green for all sweet drinks. This was done both to
177 activate and involve the children, and to randomise the serving order samples. A ranking by
178 elimination procedure was then used. The child was asked to take a sip from each of the three
179 cups presented, and then to lift or point at the one that was the best tasting. This sample was then
180 eliminated, the child was asked to again taste the two remaining samples, and then which out of
181 the two was the best. The cups were removed, and the procedure was repeated for both of the two
182 remaining cards. After the drinks, three pieces of chocolate were placed in front of the child, and
183 the same procedure was repeated for the chocolate.

184 The interviewer always made sure that each child had finished tasting the drink or chocolate
185 before tasting the next sample, and that the children did actually taste each sample. To make sure

186 that the interviewer's opinions and knowledge regarding the samples did not affect the children's
187 responses, the other experimenter randomized the order of the samples in the set, so the child
188 interviewer was blind to which sample the child tasted at any given time. The words "bitter",
189 "sour", and "sweet" were never used during testing.

190

191 *3.2.3. Variables*

192 The preference for sweetness consists of two measured variables, preference in drink and
193 preference in chocolate. Each consists of the total preference score for the three samples
194 included. The preference score is calculated by multiplying the rank of the sample (higher rank
195 indicates a higher preference) with the strength of sweetness in the sample (higher strength score
196 indicates that the sample is sweeter). The scores were computed by multiplying the intensity of
197 the sample (1, 2 or 3) with the rank of the sample (1, 2 and 3), and then transforming this to an
198 interval-scale ranging between 0 and 3, inspired by Liem, Mars, and DeGraaf (2004). As an
199 example, if the least sweet drink was the most preferred, the middle drink the second preferred,
200 and the sweetest drink the least preferred, the raw preference score would be computed as $1 \times 3 +$
201 $2 \times 2 + 3 \times 1 = 10$.

202 Sweet and bitter sensitivity are both measured variables. Hits (i.e. correct answers) were scored
203 based on the children's performance in the discrimination task, and the indicator is therefore an
204 interval score from 0 (no discrimination in the pair of the strongest tastant) to 4 (correct
205 discrimination in all four pairs). For each test, the total numbers of hits is the indicator for sweet
206 and bitter sensitivity, respectively.

207

208 *3.3. Parental questionnaire*

209 All parents received web-based questionnaires. If it was not possible or desirable for them to fill
210 it out online, they received the same questionnaire on paper. The parental questionnaire enquired
211 the child's frequency exposure to several characteristic foods for the five basic tastes, and
212 measured parental attitudes and behaviours concerning their child's diet. The questionnaire also
213 included demographic variables. The questionnaires were filled in by mothers (79.8%), fathers
214 (17.3%), or both (2.9%).

215

216 3.3.1. Food exposure

217 In order to measure food exposure, parents reported the child's exposure to 35 food items chosen
218 from an overview of foods containing a high amount of sweetness or bitterness according to a
219 French study using the Spectrum Method (Martin, Visalli, Lange, Schlich, and Issanchou, 2013),
220 and fitted to the Norwegian market. These foods were measured on a scale from 1-5, ranging
221 from "My child has never eaten this" to "My child eats this daily". The majority of the children
222 were exposed to the foods on average at least once, but there were large variations. For example,
223 none of the children had no previous exposure to the Sweet foods and snacks, but 13% of the
224 children had no previous exposure to one or more bitter foods. See Figure 3 for the distribution
225 of exposure to the foods.

226 Based on factor analysis (described in 3.5.1.), three latent variables were included in the model:
227 Sweet foods and snacks (seven indicators), Fruit (ten indicators), and Bitter snacks (three
228 indicators). Several variables, such as sugar sweetened sodas and fruit juices, had to be excluded
229 from the model in this phase.

230

231 <Figure 3 here>

232

233 *3.3.2. Parental attitudes and behaviours*

234 Parental attitudes and behaviours towards food were measured on a Likert scale from 1-5,
235 ranging from "I do not agree at all" to "I completely agree". Four latent variables were fitted to
236 the current study from a validated Norwegian questionnaire (Oellingrath, Hersleth, and Svendsen,
237 2013): Parental health attitude, Parental sugar attitude, Parental use of food rewards and Parental
238 Taste Attitude. They are each measured by two indicators (Table 2). Some variables have been
239 reversed. The questionnaire was used as it both included all relevant variables, and were made for
240 the Norwegian market.

241

242 *3.3.3. Demographics*

243 The questionnaire also included the measured variable older siblings, measured with the open
244 question "Does your child have any siblings they live with?" which is coded into no older
245 siblings (0), and older siblings (1). This study included two measured variables as control
246 variables; gender and age. Gender consisted of male (0) and female (1) categories, whereas
247 differences due to age is measured with comparing the preferences scores for Year 1 with the
248 preference scores for Year 2 for each individual child, and comparing the model for Year 1 and
249 Year 2.

250 *3.4. Research model*

251 The relations between sweet preferences and the influencing factors are investigated using path
252 modelling employing the model in Figure 4. A path model describes the relation between not
253 directly observational variables (latent variables/constructs) and observational variables
254 (measured variables). In the graphical representation of the model (Figure 4) the latent variables
255 are ovals, whereas the measured variables are squares. A path model consists of both a
256 measurement model (outer model), which describes the relation between the indicators and the

257 latent variables, and a structural model (inner model), which describes the relationship between
258 the latent variables and the measured variables. The indicators to each latent variable are
259 described in Table 2.

260 According to the model in Figure 4, sweet preference is influenced by all other variables in the
261 model, either directly or indirectly. Food exposure (Sweet food and snacks, Fruit, and Bitter
262 snacks) is influenced by parental attitudes (Parental health attitude, Parental sugar attitude,
263 Parental taste attitude, and older siblings). In path modelling, variables influenced by other
264 variables are called endogenous, and have at least one in-arrow pointed towards them (here,
265 Sweet Preference, and the three food exposure variables). The variables that influence other
266 variables are referred to as exogenous variables and have only out-arrows. The exogenous
267 variables are either measured variables (here, older siblings and the two sensitivity variables
268 sweet and bitter), or latent variables (here, Parental health attitude, Parental sugar attitude,
269 Parental taste attitude, and Parental use of food rewards) with indicators. In path modelling the
270 latent variables can be reflective (i.e. the indicators are caused by the latent variable) or formative
271 (indicators cause the latent variable), here the reflective mode is applied. In addition, gender is
272 used as a control variable.

273 <Figure 4 here>

274

275 *3.5. Statistical Analyses*

276 *3.5.1. Factor analysis*

277 To decide on latent variables for the food exposure data, Confirmatory Factor Analysis was used.

278 It was concluded that food exposure consists of three latent variables. Five components had
279 eigenvalues exceeding 1, and the scree plot revealed a break after the third component. Seven,
280 ten, and three indicators loaded substantially on each of three components, and these were

281 therefore kept as the indicators for these three variables. The additional ten food items were
282 rejected, as they loaded either on more than one variable, or on the fourth, which was not
283 conceptually sound as a variable.

284

285 3.5.2. *PLS-SEM*

286 The main analysis employed path modelling or structural equation modelling (SEM), in particular
287 partial least-squares modelling (PLS-SEM). PLS-SEM is an iterative procedure for estimating the
288 relationship between blocks of observed variables through a latent variable. PLS-SEM was used
289 for several reasons, most importantly the wish to predict differences in sweet preferences, and to
290 develop the theory further, both of which PLS-SEM is well fitted for (Hair, Hult, Ringle, and
291 Sarstedt, 2016). Additionally, PLS-SEM was suitable to the small sample size in this study (Chin
292 and Newsted, 1999).

293 In PLS-SEM, it is particularly important to validate the model. In the measurement model,
294 several measures are applied to evaluate different aspects of reliability and validity for the
295 reflective variables, in particular unidimensionality of the indicators (internal consistency
296 reliability), how well indicators are described by their latent variables (convergent validity) and
297 that the latent variables are different from each other (discriminant validity). Composite
298 reliabilities and Cronbach's alpha are included to investigate the internal consistency reliability.
299 They are both reported, as one is often overestimating internal consistency reliability, and the
300 other too conservative, respectively (Hair et al., 2016). The measure used to investigate
301 convergent validity is average variance extracted (AVE). To investigate the reliability of the
302 measurement model, we present the standardised loadings (i.e. relation between) of each
303 indicator on the respective latent variable. The discriminant validity is measured by considering
304 the size of the cross-loadings, which is an indicator's outer loading on the associated latent

305 variable. Additionally, the heterotrait-monotrait ratio (HTMT) is included to investigate if the
306 constructs in the model measure different concepts.
307 To assess the structural model, four measures are included. Firstly, to examine collinearity, VIF-
308 values are included. The coefficient of determination (r^2) is examined to measure the model's
309 predictive power. Finally, to investigate the hypotheses presented in this study, we applied one-
310 tailed significance testing, as all the hypotheses have direction. To assess the associations
311 between the variables, we use estimated path coefficients and the corresponding p-values.
312 P-values and tests for path coefficients were obtained using bootstrapping (Hair et al., 2016).

313

314 *3.5.3. Age effect*

315 To control for the influence of age, the model was run twice, using the data from the Year 1, and
316 Year 2. The relationships between the variables were examined, using the path coefficient
317 estimates and the p-values. The associations were generally the same, but similar or stronger at
318 the second year than at the first one. The results reported are therefore from the Year 2, which is
319 the year the children turned five. To further investigate age-differences, two repeated measures
320 ANOVAs were conducted, using sweet preference in drink or chocolate, respectively, as the
321 dependent variable, comparing the scores of each child at Year 1 and Year 2.

322

323 All analyses were conducted using Smart-PLS 3.5 (Ringle, Wende, & Will, 2005), except for the
324 repeated measures ANOVAs and the Confirmatory Factor Analysis, which were conducted using
325 SPSS (version 23, 2015, IBM, Armonk; NY).

326

327 **4. Results**

328 *4.1. Controlling for age*

329 No main effect of age on preference was found in the repeated measures ANOVAs, neither for
330 chocolate, ($F(1,97)=.001, p=.973$), nor for drinks ($F(1,97)=18.611, p=.068$). There was a small
331 increase in preference for sweetness in drink, which can be seen in Figure 5, with an increase in
332 preferring the sweetest drink rising from 48% to aged 59% between the years. As can be seen
333 from Figure 5, the sweetest drink was the most preferred. For chocolate, there was only
334 negligible differences were present, and there is no clear general favourite between the samples.
335 The results presented from now on are only from Year 2.

336

337 <Figure 5 here>

338

339 *4.2. Reliability and validity for the latent variables*

340 The reliability and validity of the latent variables in the model presented in Figure 4, were
341 investigated through the PLS-SEM. The model included seven latent variables, which are all
342 reflective. The standardised loadings are presented in Table 2 together with the validation
343 parameters, Cronbach's alpha, composite reliabilities, AVE, and HTMT-intervals. The
344 standardized loadings were not all above the suggested threshold of .07, but the ones below were
345 kept, as they were close, and contributed to the content validity of the model. As well
346 contributing to the convergent validity, the average variance extracted (AVE) values were all
347 above .50, indicating that the construct explained more than 50% of the variance in their
348 indicators.

349 Regarding the internal consistency reliability, all variables had levels above .60 and below .95
350 using both Composite reliability and Cronbach's alpha. The HTMT values were all well below
351 .85, the suggested threshold (Henseler, Ringle, and Sarstedt, 2015), indicating that the constructs
352 in the model measure different concepts. Additionally, all indicators had outer loadings higher

353 than the cross-loadings on the associated construct, ensuring discriminant validity. The bootstrap
 354 confidence intervals did not include the value 1, indicating that the constructs are empirically
 355 distinct (Hair et al., 2016).

356

Table 2: The measurement model: Reliability and validity for the latent variables and indicators.

Latent variable Indicator	Loadings	Cronbach's alpha	Composite reliability	AVE	HTMT- interval
Parental health attitude		.721	.807	.676	.007-.769
“I give my child what he or she likes, and do not care how healthy the food is” (R)	.794				
“I care about the healthiness of the foods my child eats”	.612				
Parental sugar attitude		.707	.787	.550	.017-.769
“I avoid giving my child high-sugar food and snacks” (R)	.690				
“I don't think about the total level of sugar my child consumes on a daily basis”	.763				
Parental taste attitude		.682	.823	.748	.017-.208
“I always choose food for my child that tastes good”	.702				
“I think healthy foods taste good”	.845				
Parental use of food rewards		.776	.842	.541	.019-.073
“I reward my child with food”	.907				
“I believe it is wrong to spoil children with candy” (R)	.642				
Sweet foods and snacks		.718	.793	.662	.196-.603
Candy	.572				
Brown cheese	.554				
Baked goods	.761				
Ice cream	.706				
Cakes	.793				
Chocolate milk	.466				

Chocolate spread	.577				
Fruit		.857	.880	.505	.172-.269
Oranges	.673				
Boysenberry	.637				
Blueberry	.655				
Apple	.630				
Strawberry	.719				
Kiwi	.788				
Clementine	.652				
Mango	.539				
Passion fruit	.712				
Pear	.565				
Bitter snacks		.715	.727	.595	.064-.517
Walnuts	.688				
Dark chocolate	.895				
Olives	.659				

Indicators marked (R) are reversed.

357

358

359

4.3. Hypothesis testing

360

The predictive model for sweet preference is summarised in Table 3. This model has a predictive

361

power of $r^2=.36$ for Sweet preference in drink, and an r^2 of $=.28$ for Sweet preference in chocolate,

362

which is respectively moderate and weak (Hair et al., 2016). The predictive model relating food

363

exposure to sensitivity and parental behaviour is summarised in Table 4. The predictive power of

364

this model is moderate for Sweet foods and snacks ($r^2=.38$), but quite weak for Fruit as well as

365

Bitter snacks, with levels of .21 and .25, respectively.

366

To investigate collinearity, VIF-values are reported in Table 3 for preferences, and Table 4, for

367

food exposure. All variables have a VIF-value below five, and thus there is not a critically high

368

collinearity between the variables.

369

Table 3:
Collinearity and estimated total effects between predictor variables and preference in sweet drink and chocolate.

	Preference in sweet drink	Preference in chocolate
--	---------------------------	-------------------------

Endogenous variable	VIF	Path coef. estimates	p-values	VIF	Path coef. estimates	p-values
Sweet sensitivity	1.10	.072	.05	1.60	.021	ns
Bitter sensitivity	1.34	.004	Ns	1.52	.107	.045
Sweet foods and snacks	1.59	.023	.02	1.36	.189	.003
Fruit	1.34	.220	.007	1.32	.163	ns
Bitter snacks	1.52	.056	Ns	1.35	.082	.04
Gender	1.17	.154	.008	1.16	.025	.006
Use of food rewards	1.20	.090	.02	1.08	.041	.03
r^2	.36			.28		

370 Ns = not significant at .05 level.

371

372 4.3.1. Controlling for gender differences

373 As can be seen from the path coefficient estimate in Table 4, girls preferred both sweeter drinks
374 and chocolate more than boys did, with the association stronger in drinks.

375 4.3.2. H1: Associations between diet and sweet preferences

376 More frequent exposure to sweet foods and snacks was associated with a higher sweet preference
377 in both drinks and chocolate. Children more often exposed to fruit preferred lower sweetness in
378 drink, but there was no association with chocolate. Higher exposure to bitter snacks was
379 associated with a higher preference for the more bitter chocolate, and thus less sweet. These
380 associations are all in line with the proposed relationships in H1. All significant relationships are
381 shown with the Path Coefficient estimate as well as the p-values in Table 3.

382

Table 4:
Collinearity, and estimated total effects, between predictor variables and Sweet foods and snacks, Fruit, and Bitter snacks, respectively.

Sweet foods and snacks	Fruit	Bitter snacks
------------------------	-------	---------------

Variable	VIF	Path coef. estimate	p- value	VIF	Path coef. estimate	p- value	VIF	Path coef. estimate	p- value
Sweet sens.	1.10	.363	.002	1.10	.012	ns	1.0 7	.096	ns
Bitter sens.	1.05	.127	ns	1.07	.010	ns	1.0 7	.374	.009
Health attitude	1.28	.471	.006	1.02	.357	.007	1.2 3	.086	ns
Sugar attitude	1.11	.114	.045	1.03	.008	ns	1.6 0	.076	ns
Taste attitude	1.12	.207	.006	1.01	.046	ns	1.0 4	.055	ns
Older siblings	1.14	.119	.048	1.16	.038	ns	1.2 3	.036	ns
r^2	.38			.21			.25		

383 Ns = not significant at .05 level.

384

385 *4.3.3. H2: Direct and indirect associations between sweet preferences and parental attitudes and*
386 *behaviours*

387 Higher parental use of food rewards was related to a preference for both the higher sweet
388 chocolate and drink.

389 Parents that scored higher on health attitude, sugar attitude, and/or taste attitude, exposed their
390 children to less sweet foods and snacks. Additionally, a high parental score on health attitude was
391 associated with higher fruit exposure for their children. Children with older siblings were more
392 exposed to sweet food and snacks. All significant associations are in line with the proposed
393 relationships in H2. All relationships are shown with the Path Coefficient estimate as well as the
394 p-values in Table 4.

395

396 *4.3.4. H3: Direct and indirect associations between sweet preference and sensitivity.*

397 Children more sensitive to sweetness significantly preferred the less sweet drinks, but the
398 association was small. More bitter sensitive children preferred lower sweet and more bitter

399 chocolate. Sensitivity also had an indirect association with preferences: Children more sensitive
400 to sweetness were less frequently exposed to sweets. These associations are in line with H3.
401 Additionally, there is an interesting association between sensitivity to bitterness and exposure to
402 bitter snacks, with children more sensitive to bitter taste actually being more frequently exposed
403 to bitter snacks than the other children are. All relationships are shown with the Path Coefficient
404 estimate as well as the p-values in Table 4.

405

406 **5. Discussion**

407 This study expands upon previous findings regarding sweet preferences in pre-schoolers, and
408 highlights that preferences can be influenced by individual and family factors, both directly and
409 indirectly. Better knowledge in this area is relevant for health authorities, the food industry,
410 parents and researchers.

411 As there is no longitudinal comparable studies to our knowledge, it is particularly interesting that
412 we did not find an age-effect, which has previously been found in cross-sectional studies (Cooke
413 and Wardle, 2005; Lanfer et al., 2013). However, as the children only aged twelve months
414 between data collections, the lack of significant difference is not surprising. The same factors
415 were associated with sweet preference at both years of data collection, which is also expected, as
416 the factors investigated should be quite stable, in particular parental attitudes and behaviours. The
417 associations were stronger at age five, when the child's environment and food habits may have
418 had a longer time to influence preferences. This points towards that an age effect could emerge
419 with a longer study.

420 The girls had a significantly higher sweet preference than boys did for both chocolates and
421 drinks, which was not found in the most directly comparable study in terms of protocol and age
422 (Liem, and de Graff, 2004). As there was no other gender differences in neither food exposure,

423 sensitivity, nor parental attitudes and behaviours (data not shown), and the association was
424 consistent for both drinks and chocolates, this might mirror an actual higher sweet preference
425 among girls than among boys. As there seems to be an increase in sweet preference within the
426 childhood years, the gender difference might be due to the girls being more mature than the boys,
427 indicating that the boys will catch up eventually.

428
429
430 The importance of parents in shaping their children's sweet preferences is evident, as parental
431 attitudes were associated with the children's exposure to foods, which again was associated with
432 their preference for sweetness. However, the associations were mostly weak or moderate. This
433 could be explained by the fact that the children have not been exposed to foods for many years
434 yet – 4.5 years at most. However, Nicklaus and colleagues (2004) found that the preschool years
435 are of particular importance to shape food preferences. Therefore, our results indicate that
436 although there is a significant association between food exposure and taste preferences, it is not
437 very large, and other factors are also important in shaping taste preferences.

438
439 The associations between parental health attitude and fruit and sweet food exposure, respectively,
440 are in line with previous studies where mothers' higher health knowledge and actions were
441 associated with higher consumption of fruit in their children (Gibson, Wardle, and Watts, 1998),
442 and lower serving of sugared foods (Schneider et al., 2013). It is also in line with The Norwegian
443 Directorate of Health (Helsedirektoratet, 2015), which recommends eating at least two fruits
444 every day, and limiting consumption of high-energy candy and snacks. Even though this
445 information is easily available for all in Norway, parents with a high health-conscious attitude put
446 higher importance on the healthiness of the foods they expose their children to, and would
447 therefore better follow these recommendations.

448 We found an association between parental sugar attitude and sweet foods and snacks, but not fruit
449 or bitter snacks. We expected that parents with a more restrictive sweetness attitude would not
450 only serve less sweet foods and snacks, but would substitute sweet foods with something else, but
451 this could be wrong, or the parents could substitute with food items not included in this study.
452 Parental taste attitude also had a significant association only with exposure to sweet foods and
453 snacks. This was unexpected, as in particular the item “I think healthy foods taste good” was
454 theorized to have a relationship with fruit, as fruit is recommend as being healthy
455 (Helsedirektoratet, 2015), and parents who serve more fruit would be expected to believe to a
456 higher degree that fruit tastes good (Skinner et al., 2002). This points towards the children’s
457 exposure to fruit being more based on parental health attitude than if the parents believe the taste
458 of fruit is good or not. Supporting this, a study using a larger version of the same questionnaire as
459 we did, found a stronger relationship between parental health attitude and an actual healthier diet,
460 than of parental taste attitude and healthy diet (Oellingrath, Hersleth, and Svendsen, 2013). The
461 study did however include older children (age 12-13) than the present one, and a larger item
462 battery for the questionnaire, indicating that more research on association between parental taste
463 attitude and children’s exposure to different foods would be interesting.

464 As expected, parental use of food rewards had a significant effect on both drink and chocolate,
465 supporting previous findings where giving something sweet as a reward increases sweet
466 preference (Birch and Fisher, 1998; Newman and Taylor, 1992). However, the association could
467 also be explained by children with a high sweet preference been given more sweet rewards, since
468 the reward would influence them more than their peers.

469 In addition to attitudes, the foods parents expose their children to are guided by practical factors
470 such as family size, shown by the heightened exposure to sweet foods and snacks for children
471 with older siblings. Interestingly, the lack of association between fruit and having older siblings

472 indicate that perhaps the presence of older siblings increases exposure to unhealthy foods more
473 than exposure to healthy ones.

474

475 More sweet sensitive children were less exposed to sweet foods and snacks than the other
476 children. For the sensitive children, sweet food would have a higher sweet intensity of taste,
477 which could be the reason why they are exposed to fewer sweets – the taste is too strong for
478 them. Another possible explanation might be that the parents of the most sweetness sensitive
479 children are also more sensitive, and therefore provide fewer sweets, as the taste would be too
480 intense for them as well.

481 The lack of associations between bitter sensitivity and sweet drink neither supports our
482 hypothesis or previous studies (Duffy, Peterson, Dinehart & Bartoshuk, 2003; Hayes & Duffy,
483 2008) finding that a higher bitter sensitivity would lead to a lower preference for sweetness.
484 However, the association was present for chocolate: More bitter-sensitive children preferred more
485 bitterness in chocolate, and thus to a lesser degree sweetness. This points towards the difference
486 in preference not being due to sweetness, but rather to differences in preference for bitterness. As
487 the more bitter sensitive children in this study are more frequently exposed to bitter snacks, these
488 children could have a higher bitter preference due to it being more familiar. Hypothesis H3 is
489 therefore only partly supported. However, bitterness is a complex taste, and the results could have
490 been different if other bitter taste agents had been used, both in the chocolate (cocoa) and for the
491 sensitivity test (quinine). This highlights the need for more research, with additional food
492 products.

493

494 Previous studies have indicated that the exact preferred level of sweetness in a product is food-
495 specific (Holt, Cobiac, Beaumont-Smith, Easton, and Best, 2000). However, people tend to have

496 low, medium, or high sweet preference across products (Holt et al., 2000). We therefore
497 investigated if the same factors would be associated with sweet preference in two different, but
498 child-friendly taste carriers. Generally, the tendency is that the same associations are found
499 between the variables and the sweet preferences in both taste carriers, at least where it would be
500 expected. We argue that finding similar associations in two quite different taste carriers (one solid
501 and one liquid) heightens the generalizability of the study.

502

503 *Limitations*

504 It is important to keep in mind that the results from this study are not necessarily applicable to
505 other sweet stimuli than the beverages and dark chocolates that were selected. Different food
506 samples and sweetness intensities might have given quite different results. This study can
507 therefore only be compared with other studies with great caution (Mojet, Christ-Hazelhof, and
508 Heidema, 2005) – for example, the high sweet concentration in this study could be more similar
509 to a medium sweet concentration in another study.

510 The food indicators in this study are chosen because they both a) are high on either sweetness or
511 bitterness, and b) fitted in the factor analysis, excluding several interesting foods, such as sodas.
512 Different food indicators could lead to different results. Additionally, although the sweet food
513 items are all sweet per se, several of the food items, such as cake and baked goods, are often
514 made at home, and could therefore easily differ in sugar content between the families in this
515 study. Highlighting this limitation, a similar study with the same age group found a positive
516 association between sweet preference and added sugar level in the child's favourite cereal (Liem
517 and Mennella, 2002). Investigating the association between total sugar consumption and taste
518 preferences would be very interesting, but we chose to focus on foods high on particular taste
519 intensities instead.

520

521

522 **6. Conclusion**

523 This study aimed at understanding how parental attitudes and behaviours as well as taste
524 sensitivity can influence sweet preferences in pre-schoolers. A protocol using ranking by
525 elimination with two different types of taste carriers (chocolates and drinks with three levels of
526 sweetness) were used with 138 children aged five (mean age 57.5 months, SD 3.3). Our research
527 expands on the existing literature regarding sweet preferences, and underlines the importance of
528 parental impact on sweet preferences. Additionally, we elaborate on the link between preferences
529 and taste sensitivity, and suggest the need for more research on the impact of bitter sensitivity for
530 both bitter and sweet preferences. Even though the majority of trends in this study were found in
531 two different taste carriers, further research may investigate different taste carriers, to understand
532 if there is a general impact of parental behaviours and taste sensitivity on sweet preference, or
533 only in particular products.

534

535 **7. Acknowledgements**

536 This work was supported by the Research Council of Norway through the project “Children and
537 food preferences in the light of the Norwegian Taste” (no. 233831/E50). The authors would like
538 to thank the research assistants, the children who participated in the study, and the kindergarten
539 personnel for their respective contributions to the data collection. Finally, the authors are grateful
540 to Sophie Nicklaus, Sylvie Issanchou, and Sandrine Monnery-Patris for useful discussions to the
541 protocol used in this study.

542 **References**

- 543 Aldridge, V., Dovey, T. M., & Halford, J. C. (2009). The role of familiarity in dietary
544 development. *Developmental Review*, 29(1), 32-44.
- 545 Bandura, A. (1977). *Social learning theory*. Englewood Cliffs, NJ: Prentice Hall
- 546 Birch, L. L. (1979). Preschool children's food preferences and consumption patterns. *Journal of*
547 *Nutrition Education*, 11(4), 189-192.
- 548 Birch, L. L., & Fisher, J. O. (1998). Development of eating behaviors among children and
549 adolescents. *Pediatrics*, 101(Supplement 2), 539-549.
- 550 Birch, L. L., & Marlin, D. W. (1982). I don't like it; I never tried it: effects of exposure on two-
551 year-old children's food preferences. *Appetite*, 3(4), 353-360.
- 552
- 553 Brown, R., & Ogden, J. (2004). Children's eating attitudes and behaviour: a study of the
554 modelling and control theories of parental influence. *Health education research*, 19(3),
555 261-271.
- 556 Casey, R., & Rozin, P. (1989). Changing children's food preferences: Parent Opinions. *Appetite*,
557 12(7), 171-182
- 558 Chen, X., Sekine, M., Hamanishi, S., Wang, H., Gaina, A., Yamagami, T., & Kagamimori, S.
559 (2005). Lifestyles and health-related quality of life in Japanese school children: a cross-
560 sectional study. *Preventive medicine*, 40(6), 668-678.
- 561
- 562 Chin, W. W., & Newsted, P. R. (1999). Structural equation modeling analysis with small samples
563 using partial least squares. *Statistical strategies for small sample research*, 2, 307-342.
- 564
- 565 Cooke, L. (2007). The importance of exposure for healthy eating in childhood: a review. *Journal*
566 *of human nutrition and dietetics*, 20(4), 294-301.
- 567 Cooke, L., & Fildes, A. (2011). The impact of flavour exposure in utero and during milk feeding

- 568 on food acceptance at weaning and beyond. *Appetite*, 57(3), 808-811.
- 569 Cooke, L. J., & Wardle, J. (2005). Age and gender differences in children's food
570 preferences. *British Journal of Nutrition*, 93(05), 741-746.
- 571 Cooke, L.J., Chambers, C.C., Añez, E.V., & Wardle, J. (2011). Facilitating or undermining?
572 The effect of reward on food acceptance. A narrative review. *Appetite*, 57(11), 493-497
- 573 Commission of the European Communities (2007). White paper—Together for health: A strategic
574 approach for the EU 2008–2013. *Rapport for the European Commission; Brussel*
- 575 De Graaf, C., & Zandstra, E. H. (1999). Sweetness intensity and pleasantness in children,
576 adolescents, and adults. *Physiology & behavior*, 67(4), 513-520.
- 577 De Cosmi, V., Scaglioni, S., & Agostoni, C. (2017). Early Taste Experiences and Later Food
578 Choices. *Nutrients*, 9(2), 107.
- 579 Dinehart, M. E., Hayes, J. E., Bartoshuk, L. M., Lanier, S. L., & Duffy, V. B. (2006). Bitter taste
580 markers explain variability in vegetable sweetness, bitterness, and intake. *Physiology &
581 Behavior*, 87(2), 304-313.
- 582 Duffy, V. B., Peterson, J. M., Dinehart, M. E., & Bartoshuk, L. M. (2003). Genetic and
583 environmental variation in taste: Associations with sweet intensity, preference, and
584 intake. *Topics in Clinical Nutrition*, 18(4), 209-220.
- 585
- 586 Gibson, E. L., Wardle, J., & Watts, C. J. (1998). Fruit and vegetable consumption, nutritional
587 knowledge and beliefs in mothers and children. *Appetite*, 31(2), 205-228.
- 588 Hair Jr, J. F., Hult, G. T. M., Ringle, C., & Sarstedt, M. (2016). *A primer on partial least squares
589 structural equation modeling (PLS-SEM)*. Sage Publications.
- 590 Hayes, J. E., & Duffy, V. B. (2008). Oral sensory phenotype identifies level of sugar and fat
591 required for maximal liking. *Physiology & behavior*, 95(1), 77-87.
- 592 Helsedirektoratet (2015). *Anbefalinger om kosthold, ernæring og fysisk aktivitet*. Rapport IS-
593 2170.

594
595 Henseler, J., Ringle, C. M., & Sarstedt, M. (2015). A new criterion for assessing discriminant
596 validity in variance-based structural equation modeling. *Journal of the Academy of*
597 *Marketing Science*, 43(1), 115-135.

598 Holt, S. H. A., Cobiac, L., Beaumont-Smith, N. E., Easton, K., & Best, D. J. (2000). Dietary
599 habits and the perception and liking of sweetness among Australian and Malaysian
600 students: A cross-cultural study. *Food Quality and Preference*, 11(4), 299-312
601

602 Kildegaard, H. (2011). *Step-by-step changes of childrens preferences towards healthier foods*
603 (Doctoral dissertation, PhD thesis, Food Science, AU. ISBN 987-87-91949-00-5).

604 Kosti, R. I., & Panagiotakos, D. B. (2006). The epidemic of obesity in children and adolescents in
605 the world. *Central European journal of public health*, 14(4), 151.
606

607 Lanfer, A., Knof, K., Barba, G., Veidebaum, T., Papoutsou, S., De Henauw, S., & Lissner, L.
608 (2012). Taste preferences in association with dietary habits and weight status in European
609 children: results from the IDEFICS study. *International Journal of Obesity*, 36(1), 27-34.

610 Lanfer, A., Bammann, K., Knof, K., Buchecker, K., Russo, P., Veidebaum, T., ... & Lissner, L.
611 (2013). Predictors and correlates of taste preferences in European children: The
612 IDEFICS study. *Food Quality and Preference*, 27(2), 128-136.

613 Lawless, H. (1985). Sensory development in children: research in taste and olfbehaviour. *Journal*
614 *of the American Dietetic Association*, 85(5), 577-82.

615 Liem, D. G., & De Graaf, C. (2004). Sweet and sour preferences in young children and adults:
616 role of repeated exposure. *Physiology & behavior*, 83(3), 421-429

617 Liem, D. G., Mars, M., & De Graaf, C. (2004). Sweet preferences and sugar consumption of 4-
618 and 5-year-old children: role of parents. *Appetite*, 43(3), 235-245.

619 Liem, D. G., & Mennella, J. A. (2002). Sweet and sour preferences during childhood: role of
620 early experiences. *Developmental psychobiology*, 41(4), 388.

- 621 Maier-Nöth, A., Schaal, B., Leathwood, P., & Issanchou, S. (2016). The lasting influences of
622 early food-related variety experience: a longitudinal study of vegetable acceptance from 5
623 months to 6 years in two populations. *PloS one*, *11*(3), e0151356.
- 624 Mannino, M. L., Lee, Y., Mitchell, D. C., Smiciklas-Wright, H., & Birch, L. L. (2004). The
625 quality of girls' diets declines and tracks across middle childhood. *International Journal*
626 *of Behavioral Nutrition and Physical Activity*, *1*(1), 1.
- 627 Martin, C., Visalli, M., Lange, C., Schlich, P., & Issanchou, S. (2014). Creation of a food taste
628 database using an in-home “taste” profile method. *Food Quality and Preference*, *36*, 70-
629 80.
- 630 Mennella, J. A., & Beauchamp, G. K. (2002). Flavor experiences during formula feeding are
631 related to preferences during childhood. *Early human development*, *68*(2), 71-82.
632
- 633 Mennella, J. A., Finkbeiner, S., Lipchock, S. V., Hwang, L. D., & Reed, D. R. (2014).
634 Preferences for salty and sweet tastes are elevated and related to each other during
635 childhood. *PLoS One*, *9*(3), e92201.
- 636 Mojet, J., Christ-Hazelhof, E., & Heidema, J. (2005). Taste perception with age: pleasantness and
637 its relationships with threshold sensitivity and supra-threshold intensity of five taste
638 qualities. *Food Quality and Preference*, *16*(5), 413-423.
639
- 640 Moskowitz, H. R. (1977). Intensity and hedonic functions for chemosensory stimuli. *The*
641 *chemical senses and nutrition*, 71-101.
642
- 643 Newman, J., & Taylor, A. (1992). Effect of a means-end contingency on young children's food
644 preferences. *Journal of experimental child psychology*, *53*(2), 200-216.
- 645 Nicklaus, S. (2016, January). Development of Food Preferences and Appetite in the First Years.
646 In *The Power of Programming 2016-International Conference on Developmental Origins*
647 *of Adiposity and Long-Term Health* (Vol. 63, No. 2, pp. 111-112).

648

649 Nicklaus, S., Boggio, V., Chabanet, C., & Issanchou, S. (2004). A prospective study of food
650 preferences in childhood. *Food quality and preference*, 15(7), 805-818.

651 Nicklaus, S., Issanchou, S., Frewer, L., & Trijp, H. V. (2006). Children and food choice.
652 *Understanding consumers of food products*, 329-358.

653 North, K., & Emmett, P. (2000). Multivariate analysis of diet among three-year-old children and
654 associations with socio-demographic characteristics. The Avon Longitudinal Study of
655 Pregnancy and Childhood (ALSPAC) Study Team. *European journal of clinical nutrition*,
656 54(1), 73-80.

657 Oellingrath, I. M., Hersleth, M., & Svendsen, M. V. (2013). Association between parental
658 motives for food choice and eating patterns of 12-to 13-year-old Norwegian children.
659 *Public health nutrition*, 16(11), 2023-2031.

660 Pohjanheimo, T., & Sandell, M. (2009). Explaining the liking for drinking yoghurt: The role of
661 sensory quality, food choice motives, health concern and product information.
662 *International Dairy Journal*, 19(8), 459-466.

663 Robinson, S., Marriott, L., Poole, J., Crozier, S., Borland, S., Lawrence, W., & Inskip, H.
664 (2007). Dietary patterns in infancy: the importance of maternal and family influences on
665 feeding practice. *British Journal of Nutrition*, 98(05), 1029-1037.

666 Scott, J. A., Chih, T. Y., & Oddy, W. H. (2012). Food variety at 2 years of age is related to
667 duration of breastfeeding. *Nutrients*, 4(10), 1464-1474.

668 Schneider, S., Jerusalem, M., Mente, J., & De Bock, F. (2013). Sweets consumption of preschool
669 children—extent, context, and consumption patterns. *Clinical oral investigations*,
670 17(5), 1301-1309.

671 Schwartz, C., Issanchou, S., & Nicklaus, S. (2009). Developmental changes in the acceptance of
672 the five basic tastes in the first year of life. *British Journal of Nutrition*, 102(09),
673 1375-1385.

- 674 Skinner, J. D., Carruth, B. R., Bounds, W., & Ziegler, P. J. (2002). Children's food preferences:
675 a longitudinal analysis. *Journal of the American Dietetic Association*, 102(11),
676 1638-1647.
- 677 Ventura, A. K., & Worobey, J. (2013). Early influences on the development of food
678 preferences. *Current Biology*, 23(9), R401-R408.
679
- 680 Vereecken, C. A., Keukelier, E., & Maes, L. (2004). Influence of mother's educational level on
681 food parenting practices and food habits of young children. *Appetite*, 43(1), 93-103.
682
- 683 Vennerød, F.F.F., Hersleth, M., Nicklaus, N., and Almlí, V.L. (2017). The magic water test. An
684 affective paired comparison approach to evaluate taste sensitivity in pre- schoolers. *Food quality
685 and preference*, 58, 61-70.
- 686 World Health Organization. (2016). Fiscal policies for diet and the prevention of
687 noncommunicable diseases. *Ginebra: WHO*.
- 688

689 *Figure 1: Spider plot of the three sweet drinks, with attributes evaluated by a professional*
690 *sensory panel. The blue line represents the drink with the highest amount of sugar (18%), the*
691 *green line the drink with medium amount (12%), and the red line the low level of sugar (4%).*
692 *There was a significant difference for sweetness, and taste intensity, acidity, richness,*
693 *astringency, and cloying taste.*

694

695

696 *Figure 2: Spider plot of the three sweet chocolates, with attributes generated by a professional*
697 *panel. The blue line represents the chocolate sample with the highest amount of cocoa (65%*
698 *cocoa) and thus the least sweet chocolate, the green line the medium bitter (55% cocoa) and*
699 *sweet sample, and the red line the least bitter (45% cocoa) and thus highest sweet taste There*
700 *were three significantly distinct levels of sweetness and bitterness, as well as all other attributes*
701 *represented in the plot, except sour taste and sour odour.*

702

703 *Figure 3: Exposure to at least one of the indicators in the variables Fruit, Bitter snacks, and*
704 *Sweet foods and snacks, respectively, either daily, weekly, monthly, at least once, or never. Given*
705 *in percentages.*

706

707 *Figure 4: Research model. Sweet preference (in either drink or chocolate) and the three Food*
708 *Exposure variables are used as the endogenous variables in the PLS-SEM model. The exogenous*
709 *variables are the two taste sensitivity variables, and the variables regarding Parental attitudes*
710 *and behaviours. Gender is included as a control variable. The latent variables are represented*
711 *with ovals, and the measured variables with boxes. Solid lines represents association with food*
712 *exposure (H1), striped lines the parental influence (H2), and dotted lines the association with*
713 *sensitivity.*

714

715

716 *Figure 5: Children's preference scores for each sample in drink (to the left) and chocolate (to the*
717 *right). The figure compares the children at age 4 and at age 5, with striped beams for age 5.*

718